

AMERICAN ENGLISH E-Teacher Program Application

Name <i>(As listed on passport)</i>			
	<i>Given Name</i>	<i>(Middle Name)</i>	<i>Family Name</i>
Country of Residence			
Are you a citizen of your country of residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will you be living in your country during the AE E-Teacher course?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email Address <i>(Please use your own email address.)</i>			
Phone Number <small>[country code][area code] [local number]</small>	For example, [1][555][1234567]		
City and place of employment			

What do you do? *(Check as many boxes as apply)*

- | | |
|--|---|
| <input type="checkbox"/> In-service Teacher (Primary)
<input type="checkbox"/> In-service Teacher (Secondary)
<input type="checkbox"/> Pre-service Teacher
<input type="checkbox"/> Tutor
<input type="checkbox"/> English Access Microscholarship Program Teacher
<input type="checkbox"/> English Access Microscholarship Program Administrator
<input type="checkbox"/> Other _____ | <input type="checkbox"/> Ministry of Education Official
<input type="checkbox"/> Administrator
<input type="checkbox"/> Principal
<input type="checkbox"/> Curriculum Developer
<input type="checkbox"/> University Professor
<input type="checkbox"/> University Lecturer |
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How will you share the information you will learn with your colleagues after the completion of the course?
(Check as many boxes as apply)

- | | | |
|---------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Presentation | <input type="checkbox"/> Conferences | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Workshops | <input type="checkbox"/> Distributing material | _____ |
| | | _____ |

E-Teacher Program Application

Statement of Purpose: Please explain your reasons for wanting to participate in the courses you selected. What impact will your participation in this program have on your institution, or region, and how do you expect to use the knowledge acquired in this course?

Please assess your present English language proficiency. (select one)

Understanding of written English	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
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Expressing yourself in written English	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
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Please assess your computer skills. (select one) ☐ Excellent ☐ Good ☐ Fair ☐ None

Please respond to the following questions by selecting one of the boxes.

I have taken an online course before	<input type="checkbox"/> Yes <input type="checkbox"/> No
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I have regular and reliable access to high-speed internet connection.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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I commit to spending 10 to 12 hours online each week for the duration of the 8-week course to participate in this course.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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